e mil		. DECLARATION FOR	[ W.4	1 - 052 9450
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3 Typewritten Full Name of Second Joint Inventor (if any)	No Produki		NAKAJIMA	
	Given Name	Middle Initial	Family Name	
*4 Inventor's Signature ==	Woriunki 7	Nakajima		
•	Dogombor	7th .	200	01
5 Date of Signature	December Month	Day		Year
6 Residence Ogasa	gun, Do	oka-prefecture,	Japan	
7 Citizenship Japanese	City Stat	te or Province	Country	
		amagnation 547 1	Horinouchi	<del></del>
8 Post Office Address (Insert complete mailing		orporation., 547-1, gasa-gun, Shizuoka-		
address, including country)				
3 Typewritten Full Name of			ov. D. s	
Third Joint Inventor (if any)	Yoshio Given Name	Middle Initial	OHBA Family Name	
0 20 1	Given Name	Middle fillidal	ranniy Name	
*4 Inventor's Signature	- yoshio		Ohlo	
5 Date of Signature	December	7th	2	001
	Month To	Day		Year
6 Residence Fukure		uoka-prefecture,	Japan	
7 Citizanship <u>Japanese</u>	•	te or Province	Country	
Lines Lines		ornoration 547 1	Horinoughi	
8 Post Office Address (Insert complete mailing	Kikugawa-cho, O	orporation., 547-1, gasa-gun, Shizuoka-	prefecture,	
address, including country)				
3 Typewritten Full Name of	$\sim$			
Fourth Joint Inventor (if any)	√ <u>Takahiro</u>		ONO	
P\	Given Name	Middle Initial	Family Name	
*4 Inventor's Signature	- Jakahu	0	Ono	
5 Date of Signature	December	7th	2	001
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6 Residence Ogasa-	gun Sahizu	oka-prefecture,	Japan	
_		te or Province	Country	
7 Citizenship <u>Japanese</u>				
8 Post Office Address		orporation., 547-1, gasa-gun, Shizuoka-		<del></del>
(Insert complete mailing address, including country)		gasa-guii, Siiizuoka-	prefecture,	
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3 Typewritten Full Name of Fifth Joint Inventor (if any)			•	
· · · · · · · · · · · · · · · · · · ·	Given Name	Middle Initial	Family Name	
*4 Inventor's Signature				
5 Date of Signature				
	Month	Day	<u> </u>	Year
6 Residence				
-	City Sta	te or Province	Country	
7 Citizenship				
8 Post Office Address (Insert complete mailing		·		

address, including country)

<sup>\*</sup>Note to Inventors: Please sign name on line 4 exactly as it appears in line 3 and insert the actual date of signing on line 5.

\*\*This form may be executed only when attached to the first page of the Declaration and Power of Attorney form and the specification (including claims) of the application to which it pertains.

## ration and Power of Attori Under Patent Cooperation Treaty 35 USC §371(c)(4)

As a below name inventor, I hereby declare that:

my residence, post office at the same and citizenship are as stated below next to my name; that
I verily believe that I am the original, first and sole inventor (if only one name is listed below) or a join inventor (if plural names are named below) of the invention entitled: Non-Austemper Treated Spheroidal Graphite Cast Iron described and claimed in the international application number PCT/JP00/03700 filed June 7, 2000
and as amended on (if any), the specification and claims of which I have reviewed and understand and for which I solicit a patent.
I acknowledge my duty to disclose information of which I am aware which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a), and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to my international application by me or my legal representatives or assigns, except as follows:
Japanese Patent Application No. 11-160313 filed on June 8, 1999.
The priority of the above applications (if any), filed within a year prior to my international application is hereby claimed under 35 USC 119. I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the patent office:
Roger W. Parkhurst, Reg. No. 25,177; Charles A. Wendel, Reg. No. 24,453; Lawrence D. Eisen, Reg. No. 41,009
ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO PARKHURST & WENDEL, L.L.P., 1421 PRINCE STREET, SUITE 210, ALEXANDRIA, VIRGINIA 22314
2805, TELEPHONE (703) 739-0220.
I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.
Full Name of Sole
or First Inventor Katsumi SUZUKI Given Name Middle Initial Family Name
*4. Inventor's Signature * Katsund Suzukin
Date of Signature December 7th 2001
Month Day Year  6. Residence Kakegawa-city, Shizuoka-prefecture, Japan
6. Residence <u>Kakegawa-city</u> , <u>Shizuoka-prefecture</u> , <u>Japan</u> City Salv State or Province Country
7. Citizenship Japanese
8. Post Office address (Insert complete mailing address, including country)  c/o Asahi Tec Corporation., 547-1, Horinouchi, Kikugawa-cho, Ogasa-gun, Shizuoka-prefecture, 439-8651 Japan

\*IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE⊠.